

5595 HWY Z  
WEST BEND 53095 Phone: (262) 334-9487  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 301  
Total Licensed Bed Capacity (12/31/01): 301  
Number of Residents on 12/31/01: 242

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? Yes  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 263

Nonprofit Church  
Skilled  
Yes  
Yes  
Yes  
263

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		12.0	
Home Health Care	No					1 - 4 Years		42.6	
Supp. Home Care-Personal Care	No					More Than 4 Years		45.5	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.7				
Day Services	No	Mental Illness (Org./Psy)	36.8	65 - 74	6.2				
Respite Care	No	Mental Illness (Other)	6.6	75 - 84	27.7			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.8	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.4	95 & Over	11.6	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.7			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	6.2		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	12.4	65 & Over	96.3				
Transportation	No	Cerebrovascular	16.9			RNs		12.5	
Referral Service	No	Diabetes	1.2	Sex	%	LPNs		9.3	
Other Services	No	Respiratory	2.5			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	15.3	Male	19.4	Aides, & Orderlies			
Mentally Ill	No			Female	80.6				
Provide Day Programming for			100.0						
Developmentally Disabled	Yes				100.0				

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Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other			Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	1	20.0	443	10	5.8	185	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	11	4.5
Skilled Care	4	80.0	237	149	87.1	157	0	0.0	0	52	78.8	192	0	0.0	0	0	0.0	0	205	84.7
Intermediate	---	---	---	12	7.0	133	0	0.0	0	13	19.7	182	0	0.0	0	0	0.0	0	25	10.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	1	1.5	159	0	0.0	0	0	0.0	0	1	0.4
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		171	100.0		0	0.0		66	100.0		0	0.0		0	0.0		242	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	6.8	Daily Living (ADL)	Independent			
Private Home/With Home Health	1.7	Bathing	0.4	71.5	28.1	242
Other Nursing Homes	1.7	Dressing	6.2	67.4	26.4	242
Acute Care Hospitals	82.9	Transferring	23.6	50.8	25.6	242
Psych. Hosp. -MR/DD Facilities	0.9	Toilet Use	15.7	54.1	30.2	242
Rehabilitation Hospitals	0.0	Eating	46.7	30.6	22.7	242
Other Locations	6.0	*****				
Total Number of Admissions	117	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.6	Receiving Respiratory Care		6.6
Private Home/No Home Health	6.7	Occ/Freq. Incontinent of Bladder	31.4	Receiving Tracheostomy Care		0.4
Private Home/With Home Health	11.7	Occ/Freq. Incontinent of Bowel	24.4	Receiving Suctioning		0.4
Other Nursing Homes	1.2			Receiving Ostomy Care		2.1
Acute Care Hospitals	9.8	Mobility		Receiving Tube Feeding		3.3
Psych. Hosp. -MR/DD Facilities	0.6	Physically Restrained	2.1	Receiving Mechanically Altered Diets		69.8
Rehabilitation Hospitals	0.0					
Other Locations	22.1	Skin Care		Other Resident Characteristics		
Deaths	47.9	With Pressure Sores	1.7	Have Advance Directives		92.6
Total Number of Discharges (Including Deaths)	163	With Rashes	2.5	Medications		
				Receiving Psychoactive Drugs		59.1

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	71.9	88.9	0.81	80.2	0.90	82.7	0.87	84.6	0.85
Current Residents from In-County	66.5	88.1	0.76	83.3	0.80	85.3	0.78	77.0	0.86
Admissions from In-County, Still Residing	23.1	22.9	1.01	27.4	0.84	21.2	1.09	20.8	1.11
Admissions/Average Daily Census	44.5	129.6	0.34	94.3	0.47	148.4	0.30	128.9	0.35
Discharges/Average Daily Census	62.0	133.7	0.46	98.8	0.63	150.4	0.41	130.0	0.48
Discharges To Private Residence/Average Daily Census	11.4	47.6	0.24	31.6	0.36	58.0	0.20	52.8	0.22
Residents Receiving Skilled Care	89.3	90.5	0.99	89.7	1.00	91.7	0.97	85.3	1.05
Residents Aged 65 and Older	96.3	97.0	0.99	90.1	1.07	91.6	1.05	87.5	1.10
Title 19 (Medicaid) Funded Residents	70.7	56.0	1.26	71.6	0.99	64.4	1.10	68.7	1.03
Private Pay Funded Residents	27.3	35.1	0.78	19.1	1.43	23.8	1.15	22.0	1.24
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	0.9	0.00	7.6	0.00
Mentally Ill Residents	43.4	30.9	1.40	35.4	1.23	32.2	1.35	33.8	1.28
General Medical Service Residents	15.3	27.3	0.56	20.3	0.75	23.2	0.66	19.4	0.79
Impaired ADL (Mean)	54.2	50.3	1.08	51.8	1.05	51.3	1.06	49.3	1.10
Psychological Problems	59.1	52.4	1.13	47.7	1.24	50.5	1.17	51.9	1.14
Nursing Care Required (Mean)	10.8	7.1	1.53	7.3	1.48	7.2	1.50	7.3	1.48